S	Medicare Spending as a Percent of GDP /1/2		Medicare as a Percent of Federal Revenues		ledicare pending in billions ollars) /3		Part A Insolvency Date (approx.)	Premiums as a Percent of Beneficiaries' Income	Budgetary Costs (+) or Savings (-) (in billions) /4		
2030	2015	2030	2015	2030	2015	2030	)	2015	2030	2015	2030
			Bas	selines							
7.6%	4.4%	6.3%	19%	28%	801	2,212	2008	7%	7%	0	0
8.6%	4.5%	8.5%	19%	38%	817	2,972	2008	7%	10%	0	0
		Viability	y Standard Ba	sed on S	pending						
o that of P	er Capita GI	OP									
6.2%	3.2%	4.3%	14%	19%	591	1,501	~2028	5%	5%	-182	-615
6.2%	3.2%	4.3%	14%	19%	591	1,501	~2028	5%	5%	-195	-1,272
			Preliminary	Estimate	<b>;</b>						
es not assu	me slowing	of costs	in the fee-for-	-service p	olan)						
6.7%	3.9%	4.9%	17%	22%	716	1,738	~2010	5%	5%	-65	-392
7.6%	4.0%	6.3%	18%	29%	729	2,227	~2010	6%	7%	-67	-622
y a premium radually income those affects. Benefits Direct ed on the geo	n support sy reased, but ected. High- s package cl ucation carv graphic payi er total prem	waiting princome prin	period for eligionemium would include con Additional maustment used me private pla	wo formu ibility for d suppor binsurance anagemen , some en an enrolle	disabled value for home tools in low-	Normal ag would be al assistan e health FFS plan private p cost area	nce for low-inco and combined olans in high-co is could see				
on fa pr	the geo ice highe emiums.	the geographic pay ace higher total prem emiums. Medicaid s	the geographic payment adjuce higher total premiums; so emiums. Medicaid spending f	the geographic payment adjustment used ace higher total premiums; some private pla emiums. Medicaid spending for Medicare p	the geographic payment adjustment used, some endice higher total premiums; some private plan enrolle emiums. Medicaid spending for Medicare premiums	the geographic payment adjustment used, some enrollees in ice higher total premiums; some private plan enrollees in low- emiums. Medicaid spending for Medicare premiums would be	the geographic payment adjustment used, some enrollees in private pace higher total premiums; some private plan enrollees in low-cost area emiums. Medicaid spending for Medicare premiums would be reduced	Direct education carved out. Additional management tools in FFS plan. the geographic payment adjustment used, some enrollees in private plans in high-coace higher total premiums; some private plan enrollees in low-cost areas could see emiums. Medicaid spending for Medicare premiums would be reduced somewhat. Deneficiaries would pay morelow income beneficiaries receive more assistance.	the geographic payment adjustment used, some enrollees in private plans in high-cost ace higher total premiums; some private plan enrollees in low-cost areas could see emiums. Medicaid spending for Medicare premiums would be reduced somewhat.	the geographic payment adjustment used, some enrollees in private plans in high-cost ace higher total premiums; some private plan enrollees in low-cost areas could see emiums. Medicaid spending for Medicare premiums would be reduced somewhat.	the geographic payment adjustment used, some enrollees in private plans in high-cost uce higher total premiums; some private plan enrollees in low-cost areas could see emiums. Medicaid spending for Medicare premiums would be reduced somewhat.

SOURCE: Medicare Commission Staff.

<sup>1.</sup> In 2000, Medicare spending will be 3 percent of GDP and 12 percent of the federal budget (revenues). Total projected Medicare spending will be \$247 billion in 2000.

<sup>2.</sup> Payroll is approximately half of GDP. For example, in 2015 under the Trustees Intermediate baseline, Medicare spending would be 9.0 percent of payroll.

<sup>3.</sup> All spending estimates after Part A fund insolvency are hypothetical.

<sup>4.</sup> Medicare cost or savings in the year shown.